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CONFIRMATION NO. 6168

SERIAL NUMBER 10/798,622	FILING OR 371(c) DATE 03/10/2004 RULE	CLASS 606	GROUP ART UNIT 3734	ATTORNEY DOCKET NO. 89000.3015NP	
APPLICANTS Brent Nistal, Seattle, WA; ** CONTINUING DATA ***** This appln claims benefit of 60/453,846 03/10/2003 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/26/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY WA	SHEETS DRAWING 10	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
ADDRESS 20601					
TITLE TUBULAR TORQUE TRANSMITTING SYSTEM FOR MEDICAL DEVICE					
FILING FEE RECEIVED 1135	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		